

LANCET

5 CROSS REFERENCE TO RELATED APPLICATIONS

N/A

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N/A

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BACKGROUND OF THE INVENTION

1. Field of the Invention

25 The present invention relates to lancets of the type used to pierce the skin for
obtaining a minute quantity of blood for analysis. More particularly, the present
invention relates to a lancet assembly having an improved safety cap adapted for
ease of removal and for secure closure and shielding of the contaminated lancet
needle tip after use.

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2. Description of the background art.

35 Lancets are often used to puncture the skin so as to facilitate the sampling of
human blood for testing and/or analysis. For example, lancets are frequently used to

obtain small amounts of blood by puncturing an appropriate area, such as the patient's fingertip. Blood samples obtained using lancets may be blotted or smeared onto various test strips or reagent pads in connection with various testing methods. For example, the blood of persons suffering from diabetes may be regularly tested using lancets to test glucose content. In addition, a wide variety of other tests may be employed using only small amounts of blood obtainable from lancet punctures.

Puncture wounds are commonly produced using disposable lancets. Such devices include a lancet body having a sharp pointed needle member that may be manipulated to produce a quick, and relatively painless, puncture of the patient's skin in order to produce at least a droplet of blood. An example of such a lancet is found in U.S. Patent No. 3,358,689, issued to Higgins, wherein a lancet needle is encased in an elongated plastic body with the needle tip embedded in a removable protective cap integrally molded with the plastic body to form a single integral unit prior to use.

Lancets are typically sterilized during production, and maintained in a sterile condition before use to prevent contamination of the lancet needle. In order to avoid contamination, lancets of the background art are manufactured with integral protective caps in order to prevent exposure and/or contamination of the lancet needle during post-manufacturing handling, shipping, and storage.

Lancets are commonly used in clinical and hospital settings by medical professionals, and are also used by individuals and patients outside of medical facilities, such as at home. Lancets may be used to puncture the patient's skin either alone by manual penetration, or in conjunction with a spring-loaded device developed to drive the lancet needle into the user's skin rapidly. Furthermore, due to concerns

about communicable diseases transmitted through body fluids such as blood, the lancet must be carefully gripped to avoid contact with the sharp end of a lancet that has been contaminated with blood. Accordingly, after using the assembly, sufficient care must be taken by the user to avoid being punctured by a used lancet assembly, and the lancet assembly must be carefully handled until it is properly disposed.

As a result of these concerns, advances have been made in recent years to increase safety in handling such used devices. U.S. Patent No. 5,385,571, issued to Moriata, discloses a lancet body having a needle end protruding from a lancet end, and a needle protector for protecting the needle. The needle protector comprises a cap or hood configured to tightly fit on the lancet end from which the needle end protrudes to insulate the needle end after use. The cap is integrally molded with the lancet body so as to be bonded to the top surface of the lancet body by a narrow neck. In order to use the lancet, the user must manually grasp and remove the cap, such as by twisting. Such is also the case with the lancet disclosed in U.S. Patent No. 3,358,689, and most other lancets currently in use.

While the background art reveals a number of improvements directed to lancet designs, there exists a need for further improvements to facilitate ease of use. Specifically, it has been found that people often experience difficulty in removing the protective cap, due largely to the relatively small size of the lancet cap and the fact that lancet caps known in the art are not shaped to facilitate easy grasping and removal. Removal of the protective cap is particularly troublesome for the young, the elderly, and those suffering from injury or disease effecting use of the hands.

Accordingly, there exists a need for an improved lancet design that overcomes the disadvantages associated with the use of lancets of the background art.

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BRIEF SUMMARY OF THE INVENTION

The present invention provides an improved lancet having a body integrally molded about an elongated shaft of a lancet needle. The lancet body includes a distal end from which the pointed needle end protrudes. The lancet body further
10 includes a cap integrally molded about the pointed end of the lancet needle and joined to the lancet body by a narrow frangible junction connecting the distal end of the lancet body and the cap. The cap includes radially projecting, diametrically opposed tabs which provide structural members that may be grasped by the user to facilitate twisting and removal of the cap.

15 Accordingly, it is an object of the present invention to provide an improved lancet design.

Another object of the present invention is to provide an improved lancet design having integrally molded cap adapted for ease of removal.

Yet another object of the present invention is to provide a lancet having an
20 integrally molded twist-off cap adapted with radially projecting tabs.

Still other features and advantages of the present invention will become apparent from consideration of the following specification and drawings.

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 is a front view of an improved lancet according to a preferred embodiment of the present invention as manufactured prior to usage;

FIG. 2 is a right side view thereof;

FIG. 3 is a left side view thereof;

5 FIG. 3A depicts a partial detail view of the area identified as 3A in FIG. 3;

FIG. 4 is a perspective view thereof with the lancet cap exploded in a detached configuration;

FIG. 5 is a front view thereof;

10 FIG. 6 is a front view with the safety cap attached in covering relation with the lancet needle tip; and

FIG. 7 is a perspective view thereof.

DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS

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With reference now to the drawings, FIGS. 1 - 7 depict an improved disposable lancet, generally referenced as 10, according to a preferred embodiment of the present invention. Lancet 10 may be used manually by a user without additional apparatus to obtain a blood sample by piercing the user's fingertip, or may
20 be used in conjunction with a mechanical apparatus. Lancet 10 includes an elongate molded body 20 having a proximal end 22 and a distal end 24. Body 20 includes an elongated rigid, slender tubular shaft 30 with a hypodermic needle-style piercing tip 32 projecting axially from distal 24 of body 20. Body 20 may be adapted to define any suitable structure to facilitate use thereof with a mechanical device. Lancet body
25 20 further includes a cap 40 integrally molded about piercing tip 32 during

manufacturing. Cap 40 is further integrally molded and joined to lancet body 20 by a frangible junction 50 connecting distal end 24 of body with outer top surface of cap 40 as best depicted in FIGS. 1 – 3, with junction 50 shown in a detailed view in FIG. 3A.

5 FIGS. 1 – 3 depict the improved disposable lancet 10 in the “as manufactured” configuration. More particularly, body 20 and cap 40 are integrally molded in surrounding relation with sterilized needle shaft 30 and piercing tip 32 during the manufacturing process. As best depicted in FIG.1, the portion of the needle that projects from the distal end 24 of body 20, namely piercing tip 32 is embedded within
10 cap 40 and frangible junction 50. This configuration maintains needle 30 and particularly piercing tip 32 in a protective environment thereby preventing contamination during post manufacturing packaging, shipping, and storage. Cap 40 includes an inner axially projecting hub 46 that receives the distal end of piercing tip 32 in the pre-use, “as manufactured” configuration. Accordingly, the relative length
15 of the projecting portion of piercing tip 32 is less than the combined length of frangible junction 50 and the top portion of cap 40 including projecting hub 46.

A significant aspect of the present invention involves providing a lancet cap that is adapted for ease of removal. More particularly, cap 40 includes radially projecting, diametrically opposed tabs, referenced as 42, which function as structural
20 members that may be grasped by the user and twisted to remove the cap. Tabs 42 preferably include arcuate peripheral edges as depicted in FIG. 1. Tabs 42 thus provide a user with projecting structures that may be grasped so as to enable twisting of cap 40 such that frangible junction 50 fails thereby releasing cap 40 from the

detached configuration such that the cap may be separated from distal end 24 of body 20.

Cap 40 is also adapted to frictionally engage the distal end 24 of body 20 when cap 40 is reinstalled as shown in FIGS. 5 – 7 after lancet 10 is used so as to prevent blood from coming in contact with other persons and to help insure that no further contact is made with piercing tip 32. FIG. 5 depicts the cup-shaped cap positioned relative to body 20 prior to frictional engagement with the distal end 24 of body 20. Cap 40 is inverted relative to the pre-use configuration depicted in FIGS. 1 – 3, and aligned for engagement with body 20. Cap 40 includes an interior surface that defines an annular shoulder, referenced as 44. Cap shoulder 44 provides a stop surface that contacts the distal end 24 when body 20 is insertably engaged therewith. As previously discussed, cap 40 includes an inner axially projecting hub 46 that receives the distal end of piercing tip 32 in the pre-use, “as manufactured” configuration as depicted in FIGS. 1 - 3. Hub 46 further functions to frictionally receive a portion of needle piercing tip 32 when cap 40 is placed onto the distal end 24 of body 20 as best illustrated in FIG. 6. Accordingly, cap 40 is securely maintained on body 20 by frictional engagement at multiple contact points, namely, between needle tip 32 and hub 46, and between the inner circumferential side edge of cap 40 and the outer circumferential side edge of distal end 24 of body 20.

As should now be apparent, lancet 10 may be used by first disengaging cap 40 from body 20 wherein removal of the cap is accomplished by grasping cap tabs 42 and twisting so as to break frangible junction 50 thereby freeing cap 40 for separation and exposing piercing tip 32 of needle 30. Thereafter, lancet 10 may be used to

puncture a person's skin either with or without the aid of a mechanical apparatus.

After use, cap 40 is positioned as depicted in FIG. 5 and placed over distal end 24 of body 20 and pushed downward onto the lancet body such that the contaminated tip 32 pierces hub 46 until cap shoulder 44 engages distal body end 24 thereby so as to

5 stop further movement and terminate the capping procedure.

The instant invention has been shown and described herein in what is considered to be the most practical and preferred embodiment. It is recognized, however, that departures may be made therefrom within the scope of the invention and that obvious structural and/or functional modifications will occur to a person

10 skilled in the art.